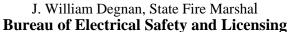


STATE OF NEW HAMPSHIRE DEPARTMENT OF SAFETY

Richard M. Flynn, Commissioner

Division of Fire Safety Office of the State Fire Marshal



Office: 2 Industrial Park Drive, Building 2, Concord, NH Mailing Address: 33 Hazen Drive, Concord, N.H. 03305 603-271-3748, FAX 603-271-2257

INVESTIGATION REQUEST FORM

Please print. Answer as many questions as possible.

INVESTIGATION REQUESTED BY:		DATE:	
NAME:			
STREET:			
CITY:	STATE:	ZIP CO	DDE:
TELEPHONE NUMBER: (WORK)		(HOME)	
PERSON OR COMPANY PERFORMING V	WORK:		
STREET:			
CITY:	STATE: _	ZIP COI	DE:
TELEPHONE NUMBER: (WORK)		(HOME)	
LICENSED OR UNLICENSED?			
LOCATION OF JOB:(Street)		(City/Town)	(Zip Code)
WAS THE JOB COMPLETED?		IF NO F	PLEASE EXPLAIN ON BACK
DATE JOB WAS STARTED:		WAS PERMIT OBTA	AINED?
WAS JOB INSPECTED BY LOCAL AUTH	IORITY?	APPRO	OVED?
NAME OF DEDSON WHO INSDECTED TO	HE IOR:		

PLEASE STATE THE REASON FOR REQUESTING AN INVESTIGATION ON THE REVERSE SIDE OF THIS FORM.



BRIEFLY STATE THE FACTS below and attach COPIES of any contracts, bills of sale, guarantees, etc. Return this form and the documents to:

BUREAU OF ELECTRICAL SAFETY AND LICENSING

33 Hazen Drive Concord, New Hampshire 03305

To the best of my knowledge the above statements are factual and true.				
Signature:	Date:			